•		_		_					
PE JC	ease type a plus sign (+) insid Under the Paperwork Re a valid OMB control num	eduction Act of 1995, no perso	Patent and Trademar	PTO/SB/01 (12-97)  Approved for use through 9/30/00. OMB 0651-0032  Patent and Trademark Office; U.S. DEPÄRTMENT OF COMMERCE are required to respond to a collection of information unless it contains					
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	DECLADATION.	500 UTU ITV 05	Attorney Docke	t Number	MLW-3				
# 20 200 E	DECLARATION	FOR UTILITY OR SIGN	First Named Inv	entor	Weiner, Michael L.				
	PATENT A	PPLICATION	COMPLETE IF KNOWN						
FIFAT & TRADENTE		R 1.63)	Application Number 09/930,364						
i,			Filing Date	Augu	ıst 15, 2001				
[	□ Declaration     Submitted OR	LXI Declaration Submitted after Initial	al Group Art Unit						
	with Initial Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name						
	As a below named inventor, I hereby declare that:  My residence, post office address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  "PROCESS FOR TREATING BIOLOGICAL ORGANISMS"  the specification of which  (Title of the Invention)  is attached hereto  OR  was filed on (MM/DD/YYYY)  [O8/15/2001]  as United States Application Number or PCT International  Application Number  and was amended on (MM/DD/YYYY)  (if applicable).  I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.  I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.  I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of or of PCT international application at a filing date before that of the application on which priority is claimed.								
	Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		py Attached? NO			

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Filing Date (MM/DD/YYYY)

Application Number(s)

[Page 1 of 2]
Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



PTO/SB/01 (12-97)

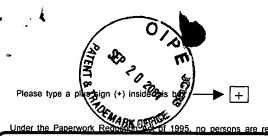
Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

_												
United States United States information wh	of Ameri or PCT Ir nich is ma	fit under 35 U.S. ca, listed below ternational appl aterial to patenta international filir	and, ins ication i bility as	sofar as the sut n the manner pr s defined in 37 C	oject matte ovided by t CFR 1.56 w	r of each he first pa	of the ragra	e claims of this ph of 35 U.S.C	s applic C. 112, I	ation i: ackno	s not disclose wledge the dui	d in the prio ty to disclose
U.S. Parent Application or PCT Parent Number			Parent Filing Date (MM/DD/YYYY)				Parent Patent Number (if applicable)					
		PCT internation nereby appoint the										
and Trademark	Office c	onnected therew	ith: 🔀	Customer Num OR	ber [27]	57				→ [		
					tration	name/registration number listed below						
	Nam	e		Nun	nber			Name	PATENT TRADEMARK OFFICE			
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.												
Direct all correspondence to: X Customer Number or Bar Code Label												
Name		27157										
Address		PATENT TRADEMARK OFFICE										
Address						•						
City						Stat	e		ZIP			
Country		Telephone						Fax				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor:					A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])					Family Name or Surname							
Michael L.					Weiner							
Inventor's Signature  Date 96/6												
Residence: City Webster State NY			NY	Cou	ntry	US		_	Citizenship	US		
PostOffice Address 93 Summit Drive												
Post Office Address												
City		Wester	State	NY	ZIP	1458	30		Cou	ntry	US	
XAdditional	invento	ors are being na	amed o	on the 1 su	pplement	al Addition	onal I	nventor(s)sl	heet(s)	PTO/	SB/02A atta	ched heret



PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it contains a valid OMB control number.

## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if a	A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any	y])	Family Name or Surname						
Robert W.		Gray						
Inventor's Roll W C			/Date 9-12-2001					
Residence: City Rochester State NY			Country US		Citizenship US			
Mailing Address 180 Poplar Street, #4								
Mailing Address								
City Rochester	City Rochester State NY			ZIP 14620 Country US				
Name of Additional Joint Inventor, if a		A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any	Family Name or Surname							
Stuart G. MacDonald								
Inventor's Signature / Tout G.	Man	\_	) 2		O6 Sept 01			
Residence: City Pultneyville	State NY		Country US	Citizenship US				
Mailing Address 4663 East Lake Road					· 			
Mailing Address								
City Pultneyville	State NY	ZIP 14538 Country US						
Name of Additional Joint Inventor, if any:								
Given Name (first and middle [if any])			Family Name or Surname					
•								
Inventor's Signature		Date						
Residence: City State			Country		Citizenship			
Mailing Address								
Mailing Address								
City	State		ZIP	Co	untry			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.